POSITION	INITIALS	ID NO.	DATE	
FEE DETERMINATION	Sm		11/38/99	
O.I.P.E. CLASSIFIER		7	121190	
FORMALITY REVIEW	D/b_	70014	1)2/15/99	

INDEX OF CLAIMS

	-	Rejected	N	Non-elected
1		Allowed	l	Interference
,		(Through numeral) Canceled		Appeal
/	÷	Restricted	0	Objected

- (Through numeral) Canceled A								
Claim Date	Claim	Date	Cı	laim	Date			
The size of				T-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1				
Final All All All All All All All All All A	Final			Original				
	<u> </u>		1 1 1 1 1 1 1 1	- -	 			
1 100 1 1 1 1 1 1	51	1-1-1-1-1		110	 - - - -			
	52			112	 			
В	53			113				
14	54		 	114				
5	55			115				
6	56			116				
7 2	57			117				
18	58			118				
9	59			119				
ho	60			110				
11	61			111				
12	62			112				
13	63			113				
14	64			114				
15	65			115				
115	66			116				
1- 1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	67	- - - - - - - - - - - - - - - - - - - 		117				
	68			118				
19	69	 - 		119				
1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	70	 - 		120				
204				121	 			
	71	- 	┼┼┼┤├	122				
20 / 4	72		┷┼┼┼┼	123				
23	73			124				
24	74				 - - - - - 			
25	75			125	 			
(१)	76			126				
27	77			127				
28	78			128				
29	79			129				
30	70			130				
হ্যা	81			131				
32	82			132				
33	83			133				
34	84			134				
35 /	85			135				
35	86			136				
37	87			137				
38 1	88			138				
39	89			139				
40	90			140				
41	91		 	141	 			
\	92	 	┝╼┾╾┼╌┼╌┤╴├	142	 - - - - - - - - - - - - - - - - - - -			
42		├─├─ ├	├─┼─ ┤─ ├	143				
43	93	 	╎╎╎┤ ┤	144	 			
44	94	 	┝┼┼┼┤┝	145	-+-+-+			
45	95	│ 	├─┼ ─┼─┤ ├					
46	96	 - - - 	┝╃╃╃	146				
47	97		\vdash	147				
48	98		\vdash	148				
49	99	- - - -	\vdash \vdash \vdash \vdash	149				
50	100			150				

If more than 150 claims or 10 actions staple additional sheet here

(LEFT INSIDE)